	TO	OTAL CHARGE	ABLE CLAIMS	mir	nus 20=	*			X\$ 9=	
	INI	DEPENDENT C	LAIMS	minus 3 =				,	X42=	
30-04	M	JLTIPLE DEPEN		+140=						
	* 11	the difference	1	TOTAL	<u>,</u>					
		С		<del></del>						
			(Column 1)	·	(Colun		(Column 3)		SMALL	ENTITY
	AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE
	NON	Total	. 7	Minus	** 3	4	=		X\$ 9=	/
2	<b>AME</b>	Independent	* /	Minus	*** (	γ Υ	=		X42=	/
		FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM			+140=	/
		TOTAL ADDIT. FEE								
	ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER DUŞLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE
	AMENDMENT	Total	*	Minus	**		=		X\$ 9=	
	ME	Independent	*	Minus	***		=		X42=	

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

(Column 1)

NUMBER FILED

(Column 2)

NUMBER EXTRA

**CLAIMS AS FILED - PART I** 

**TOTAL CLAIMS** 

TOTAL CHARGEABLE: CLAIMS

FOR

ADDI-ADDI-RATE TIONAL RATE TIONAL FEE FEE X\$18= X\$ 9= OR X84 =X42= OR +280= +140= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE

Application or Docket Number

OR

+140=

ADDIT. FEE

TOTAL

FEE

370.00

OTHER THAN

SMALL ENTITY

FEE

740.00

ADDI-

TIONAL FEE

ADDI-

TIONAL FEE

RATE

X\$18=

X84=

+280=

TOTAL

RATE

X\$18=

X84=

+280=

ADDIT. FEE

RATE

X\$18=

X84=

+280=

ADDIT. FEE

TOTAL

TOTAL

OTHER THAN

**SMALL ENTITY** 

OR BASIC FEE

**SMALL ENTITY** 

TYPE [

RATE

BASIC FEE

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

(Column 1)

CLAIMS

REMAINING

**AFTER** 

AMENDMENT

 If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." \*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

Minus

Minus

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

(Column 2)

HIGHEST

NUMBER

**PREVIOUSLY** 

PAID FOR

\*\*\*

(Column 3)

PRESENT

**EXTRA** 

**=**;

AMENDMENT

Total

Independent

**GROUP 3600** 

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		PPLICATIO					D			plication or 288.112			
	AGE 1 S	CLAIMS	AS FILED -		ı	mn 2)		SMAI	LLE	NTITY	OR	OTHER TO	
FOR			ER FILED		NUMBER 14	EXTRA		RA1	Œ	FEE		RATE	FEE
	SIC FEE CFR 1.16(a))									s 355	OR		s 710
TOT	AL CLAIMS	34	min	us 20 =	• 14			x S_S	) _	126	OR	x \$ 18 =	
	DEPENDENT CLAIMS 11 minus 3 = * 8 x 40 = 320 OR x 80 =												
		DENT CLAIM PR	ESENT O	7 CFR 1.16(	ത			+ 13	5-		OR	+ <u>270</u> =	
ifd⊯	difference in colum	nn I is less then zero,	mer "O" in colu	mn 2				тот	AL	801	OR	TOTAL	18
		CLAIN (Column 1)	AS AS AMI		) - PART II	(Column 3)		SMA	LL E	NTITY	OR	OTHER T	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RAT	Œ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	* 18	Minus	** 3	4	= 0	1	x s <u>    9</u>	1	0	OR	x \$ <u>18</u> =	0
	Independent (37 CFR 1.16(b))	* 6	Minus	***	5	= 0	11	<sub>x</sub> 40		0	OR OR	x <u>80</u> =	U
^	FIRST PRES	ENTATION OF M	TATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4))				1	+_13	5_		OR	+ <u>270</u> =	
		(Column 1)		(Ca	olumn 2)	(Column 3)	- : AI	TOT ODIT. F			OR	TOTAL DDIT. FEE	
AMENDMENT B	:	CLAIMS REMAINING AFTER AMENDMENT		PRE	GHEST UMBER VIOUSLY ID FOR	PRESENT EXTRA		RAT	TE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(0))	* 18	Minus	** 3	4	= 0	1	x \$ <u>9</u>	_=	0	OR	x s <u>18</u> =	0
	Independent (37 CFR 1.16(b))	* 6	Minus	***	;	= 0	1	x_40	_ =	0	OR OR	x <u>80</u> =	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (DTCFR L.14(4)) + 135=						<u>5</u> =		OR	+ 270=				
		(Column I)		(C	olums 2)	(Column 3)	; A	TO DDIT.	TAL FEE		OR	TOTAL ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PRE	GHEST UMBER VIOUSLY AID FOR	PRESENT EXTRA		RA'	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	* 18	Minus	** 3	4	= 0		x <b>5_</b> 9	_=	0	OR	x \$ <u>18</u> =	0
	Independent (37 CFR 1.16(b))	* 6	Minus	***	5	= 0	7	×_40		0	OR OR	× <u>80</u> =	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (77 CFR 1.19(4))							+ 13	5 =		OR	+ <u>270</u> =	
		ımn 1 is less than th						TC	TAL		OR	TOTAL	

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\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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